



12-21-5

PART B - FEE(S) TRANSMITTAL

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**EV325726891US**

**CERTIFICATE OF MAILING**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service to Mail Stop Issue Fee on the date indicated below via Express Mail Label: EV 325726891 US

<b>S. Maurice Valla</b>	(Depositor's name)
<i>S. Maurice Valla</i>	(Signature)
<b>December 20, 2005</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/764,990	01/22/2001	Jerome Besse	CEPF-0013	4037

TITLE OF INVENTION: PHARMACEUTICAL COMPOSITION INTENDED IN PARTICULAR FOR THE PREVENTION AND THE TREATMENT OF RADIOMUCOSITIS AND CHEMOMUCOSITIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	12/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS	
AZPURU, CARLOS A	1615	424-434000	01 FC:1501 02 FC:8001

12/22/2005	HVUONG2	00000006	09764990
			1400.00 OP 30.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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**Woodcock Washburn LLP**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

**LABORATOIRE L. LAFON**

**MAISONS ALFORT, FRANCE**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
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☒ A check in the amount of the fee(s) is enclosed.  
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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *S. Maurice Valla*  
Typed or printed name **S. Maurice Valla**

Date **December 20, 2005**  
Registration No. **43,966**

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